

**APPLICATION FOR CONDITIONAL LIEN AMNESTY
CITY OF JACKSON DEPARTMENT OF PLANNING & DEVELOPMENT**

PART I: PROPERTY OWNER/SELLER

NAME: _____

CURRENT ADDRESS of Property Owner/Seller _____

City: _____ State: _____ Zip: _____ Telephone: _____

PART II: PROPERTY TAX ASSESSMENT INFORMATION

PHYSICAL ADDRESS OF PROPERTY _____

LEGAL DESCRIPTION OF PROPERTY to be sold: (You may submit on separate sheet.)

As recorded in Dee Book # _____ Page _____

LIST AMOUNT OF CLEAN UP AND DEMOLITION ASSESSMENTS THAT HAVE ACCRUED STARTING WITH TWO YEARS AGO BACK*	YEAR	DATE OF ASSESSMENT	AMOUNT ASSESSED
	Administrative or Other Fees Added		
	Total Amount of Assessments		\$
	*Only liens that date two years ago and earlier qualify for lien amnesty.		

PART III: PROPERTY APPRAISAL INFORMATION

APPRAISAL	APPRAISAL DATE	APPRAISER'S NAME	APRAISER'S LICENSE #	APPRAISAL VALUE
No. 1				
No. 2				
Average of two appraisals				\$
Notice: Please attach a copy of the two appraisals to this application.				

APPLICATION FOR CONDITIONAL LIEN AMNESTY (PAGE 2)

PART IV: INFORMATION ON SALE OF PROPERTY

SALE PRICE pursuant to SALES CONTRACT (Attach copy of signed Contract) \$ _____

NAME OF PURCHASER / DEVELOPER (Entity or Person(s)) _____

_____ **Telephone:** _____

ADDRESS _____ **City/State/Zip** _____

NAME OF AGENT OR REPRESENTATIVE: _____

_____ **Telephone:** _____

ADDRESS OF AGENT: _____ **City/State/Zip** _____

**PART V: BRIEF DESCRIPTION OF PROPOSED REDEVELOPMENT PROJECT:
(Please attach complete development plan.)**

Projected cost of new development \$ _____

Date construction is scheduled to commence _____

ESTIMATED COMPLETION DATE: _____

PART VI: SIGNATURES:

The undersigned seller and developer agree and understand that by submission of this application, the City of Jackson is not obligated to grant lien amnesty. They further understand that it is within the discretion of the City of Jackson to grant such conditional lien amnesty and that final removal of liens will be granted upon successful completion of the proposed redevelopment project herein described.

SIGNATURE of Seller: _____ **Date:** _____

SIGNATURE OF Purchaser/Developer: _____ **Date:** _____

Note: Please attached the following documents to this application: (1) Copies of Property Liens assessed by the City for clean-up or demolition fees; (2) Two appraisals completed within the past three months (3) Sales Contract signed by both parties; and (4) A development plan including site plan drawings, blue prints and itemized construction costs. **Return by mail to: Land Development Division, P. O. Box 17, Jackson, MS, 39205 or by hand to: 200 S. President St., Room 204. Phone: 601-960-2266.**

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED!

APPLICATION FOR CONDITIONAL LIEN AMNESTY (PAGE 3)

CITY OF JACKSON OFFICE USE ONLY

Number of appraisal reports provided: _____ Average of appraisals \$ _____
Multiply **x .70**
Equals _____
Sales Contract Provided? _____ Yes _____ No / Purchase Price _____
Does Sales Price exceed seventy percent of value? _____ Yes _____ No.
Estimated time period required to develop property: _____
Is this period greater than 18 months? _____ Yes _____ No
What is the projected market value of the redevelopment? \$ _____
Estimated annual property tax revenue anticipated from project \$ _____

CITY OF JACKSON OFFICE OF CITY ATTORNEY

Does application meet the Statute authorizing Conditional Lien Amnesty? _____ Yes _____ No
Approved for routing back to Planning? _____ Yes _____ NO

Comments:

SIGNATURE OF REVIEWING COUNSEL: _____

DATE: _____

COMMENTS:

CONDITIONAL LIEN AMNESTY APPROVED BY _____

SIGNATURE _____

TITLE _____ DATE _____